

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:		2 Serial/Patent # <u>10/518257</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input checked="" type="checkbox"/>	Filing			\$ <u>100</u>
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.	REFUND COMPLETED PCT NATIONAL DIVISION		\$
	Maintenance	REFUND COMPLETED PCT NATIONAL DIVISION		\$
	Assignment			\$
	Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ <u>100</u>	
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
<input checked="" type="checkbox"/>	Overpayment		Credit Deposit A/C #:	
	Duplicate Payment		<u>9</u> <u>14</u> -- <u>1</u> <u>270</u>	
No Fee Due (Explanation):				
REFUND COMPLETED PCT NATIONAL DIVISION				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>J. H.</u>		TITLE: <u>Forelegel</u>		
SIGNATURE: <u>J. H.</u>		PHONE: _____		
OFFICE: <u>PCT</u>		*****		
THIS SPACE RESERVED FOR FINANCE USE ONLY:				
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B

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<input type="checkbox"/> Amendment				\$
<input type="checkbox"/> Extension of Time				\$
<input type="checkbox"/> Notice of Appeal/Appeal				\$
<input type="checkbox"/> Petition				\$
<input type="checkbox"/> Issue				\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.				\$
<input type="checkbox"/> Maintenance				\$
<input type="checkbox"/> Assignment				\$
<input type="checkbox"/> Other				\$
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		Treasury Check		
<input checked="" type="checkbox"/> Overpayment		Credit Deposit A/C #:	<u>14--1210</u>	
<input type="checkbox"/> Duplicate Payment				
10 REASON:				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>J. H.</u>		TITLE: <u>Jurley, L</u>		
SIGNATURE: <u>J. H.</u>		PHONE: _____		
OFFICE: <u>DCT</u>		*****		
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